

ORIGINAL ARTICLE

Three's a crowd: The impact of the organisation on the fee practices of volunteer therapists

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Abstract

Aims: To explore how therapists experience significant events surrounding the fee within a voluntary organisation setting when tasked with sustaining fee payments without financial gain to themselves. *Method:* A qualitative study involving semi-structured interviews with twelve therapists of varying modalities, practising voluntarily within a counselling organisation. Participants shared a significant event surrounding the fee, their response, the sense they made of it and its lasting impact. Transcriptions were analysed using thematic analysis. *Results:* Findings captured a rich set of experiences that roused powerful tensions involved in a therapeutic consideration of money, grouped into four main areas of impact: Impact from Within, Impact from Outside, Impact on Therapist and Legacy. Belief in its strengthening presence within the therapeutic dyad was in stark conflict with the threat it posed to rupture the relationship and revealed powerful dissonance, impacted further by the complex tripartite dynamic fostered by the organisation. *Conclusions:* Money can be worked with creatively to facilitate movement within therapy. However, this is most often achieved only after therapist and client have tolerated considerable discomfort when money is concretely handled outside the therapeutic space. Less risk of rupture occurs when the fee is contained within the therapeutic relationship, and when responsibility is assumed by the therapist from the outset.

Keywords: fee practices, money, practitioner research, voluntary organisation

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Introduction

A taboo surrounds the discussion of money even though it is a 'central motivation for many in our society' (Krueger, 1991; p. 209). Trachtman (1999) suggests that money provides 'a screen onto which almost any psychological issue can be projected' (p. 275) and is, therefore, a potential therapeutic tool. Yet money is often ignored in psychotherapy literature, training, and practice, leaving practitioners and clients inhibited about discussing it (Krueger, 1986; Shainess, 1991). Monger (1998) regarded this reticence as an enduring cultural phenomenon, as potent today as in 1913, when Freud likened money matters to sexual matters, treated with the same 'inconsistency, prudishness and hypocrisy' (p. 131).

Freud recognised the diverse and complex significances of money within therapy, in its concrete handling in the transfer from client to therapist and the depth of its unconscious meanings. He supposed a relationship between money and faeces, observing that it is often handled with pleasure and a need to control, retain and release, paralleling an infant mastering his bowel, the retained faeces being his first 'saving' and the first stool being an early 'expenditure'. Ferenczi (1952) saw an interest in money develop from an interest in faeces, through increasingly sublimated objects, to symbolise anything one can give or take. He viewed money as a source of narcissistic supply originating from an instinctual need for omnipotence and symbolising power, control, competence and self-worth. Such associations can cause reticence in money

matters. Klebanow (1991) noted that the therapist's personal relationship with money can enter the work, potentially distorting his or her capacity to be fully receptive to the client.

Within therapy the potency of the symbolism of money is intensified. Fears of exploiting a vulnerable client or assuming a position of dominance within the relationship (Power & Pilgrim, 1990; Taylor, 2002) account for a notable preference amongst practitioners to delegate responsibility to administration staff (Gully & Harris, 1982). This arrangement can be an incentive for the therapist to choose a voluntary organisation setting; the unpaid nature of the work thought to sidestep the discomfort of providing a beneficent relationship that is conditional upon the collection of a fee (Clary et al., 1998). However, regardless of the organisation being in receipt of the money, Tintner (2006) states that when it comes to a fee-for-service exchange, '...the analyst is a very real participant' (p. 123).

Common to private practice is the typical dyadic relationship in which the fee-for-service nature is explicitly understood. Fees are generally fixed, exchanged within the therapeutic space and provide a living wage for the therapist. However, within the voluntary sector, counselling organisations operate on a not-for-profit basis, more commonly adopting a system of minimum client donations that are flexible or on a sliding scale. The concrete exchange of money typically happens with organisation staff, outside the therapeutic space and contributes towards the organisation's costs. Reliance on unpaid volunteers to generate donations, and ultimately secure the organisation's survival, sets them apart from government-funded public sector services, adding greater significance to sustaining the exchange.

The dual role of the fee in psychotherapy causes confusion within the voluntary organisation arrangement. Supplying a living wage to the service provider (the organisation) and being an integral part of the service process means it presents both within and outside of the therapeutic space. Copeland (2005) argues this facilitates separate, yet interrelated working alliances: between therapist and client (the therapeutic relationship) and client and organisation (the monetary relationship), with a third service delivery relationship established between the therapist and organisation. When payments become irregular, responsibility can shift from the organisation to the therapist to be considered as part of the therapeutic communication. The therapist is then tasked with containing an exchange that otherwise happens outside the work.

The existence of a third party undoubtedly has a presence within the therapy, demanding modification to the dyadic relationship. Gray (2002) argued that unconscious communication, roused by the monetary exchange between client and organisation, gets expressed with the therapist but its interpretation is impeded by this disconnect. Herron and Welt (1992) and Taylor (2002) agree that the outside influence of a third party can challenge the therapist's ability to contain the work. Gray (2002) advocates an optimum situation in which both aspects of the exchange are contained within the dyad, with the organisation serving only to support the therapist in his or her ability to manage the work. However, Symons and Wheeler (2005) noted a tendency for therapists to alter their usual practice or make overt changes to the frame when it is challenged by the needs of a third party.

The occurrence of splitting within the tripartite relationship can also lead to unhelpful collusion of two parties against the third. Geistwhite (2000) noted the organisation is commonly the subject of displaced feelings from within the therapeutic exchange, particularly if viewed as the 'fee-enforcer'. Furthermore, the imposition of the organisation can be experienced to undermine the therapist's autonomous practice, which Taylor (2002) argued removes any incentive to take responsibility for sustaining payments. Monger (1998) found that volunteer therapists are much less likely than private practitioners to pursue deviant payments, even in full knowledge of its importance to the organisation's income. Arguably, when fees are handled outside the therapeutic relationship the fee-for-service arrangement is disguised and a potentially rich source of communication gets lost in the wider tripartite dynamic.

Little research exists to explore the specific ways in which the monetary exchange is impacted by the setting. Less still surrounds the tripartite relational dynamic that is fostered within a voluntary organisation. To address this curious gap, this study explores how therapists experience significant events surrounding the fee when working in a voluntary setting. By encouraging practitioners to face money issues and understand the setting in which they practice, it aims to challenge prevailing cultural attitudes that threaten their capacity to consider money as a useful tool to the work.

Method

Design

The research was embedded within a constructivist paradigm, considered appropriately rooted in the

researcher's relativist philosophy that assumes multiple realities as opposed to a single true reality constructed by participants (Schwandt, 1994). As its aim was to capture a range of unique experiences, it supposes subjective reality that is influenced by the context of the lived experience, and the interaction between participant and researcher. A qualitative design was adopted to achieve an in-depth exploration of the unique experience of each participant.

Reflexivity

Relevant was the researcher's voluntary psychodynamic practice in a UK Midlands-based counselling organisation, alongside a paid role as manager of a Norfolk-based counselling centre. The opposing roles were considered to positively enhance the researcher's understanding of participant experiences with a greater sensitivity to the complexity of the dynamic being explored. Assumptions prior to commencement included a general reticence amongst counsellors in speaking about money, as well as uncomfortable feelings evoked in managing a 'fee-for-service' arrangement, particularly at a novice stage of practice.

Participants

Participants were selected using purposive sampling, in which the researcher considers who it would be most fruitful to include, as opposed to at random (Maykut & Morehouse, 1994). All participants were currently practising counsellors, working in an unpaid voluntary capacity with clients who pay a monetary sum towards the income of a counselling organisation. Research flyers were sent to the directors of five UK Midlands-based voluntary organisations to disseminate amongst volunteer counsellor teams. The participating sample of twelve comprised two males and ten females between 28 and 63 years old with an average of three years experience working within a voluntary organisation. There was a White British ethnic majority (67%) and 50% were psychodynamic practitioners (25% person centred, 17% Gestalt, 8% Integrative). A sample size of twelve was considered optimum to facilitate the full range of potential themes before theoretical saturation occurs (Elliott & Timulak, 2005).

Data collection and analysis

Semi-structured interviews lasted approximately 45 minutes. These were audio-recorded, with written

permission gained from participants. The interview agenda comprised four main areas of experience: the significant event (defined as 'an experience in which the fee entered into the therapeutic space, either as a concrete exchange or in a symbolic way'), the participant's response, their understanding of the experience and an evaluation of any lasting changes, including feedback on participation. Interview recordings were transcribed verbatim. Participants received transcripts and were invited to make amendments to add catalytic validity, however none were requested.

Thematic Analysis (Braun & Clarke, 2006) was chosen for its compatibility with a constructivist paradigm, enabling each participant's voice to be heard while also abstracting a more general set of themes. This six-step procedure began with the transcription of interviews, immersing the researcher in the narrative. From this, data extracts or 'meaning units' were identified and assigned initial codes. Each meaning unit was carefully collated to generate an emerging set of broader themes. A continual reworking and refining of themes ensured a best fit was achieved. Attention was given to the internal homogeneity of each theme to ensure meaningful coherence of the data extracts while also considering the validity of the themes in representing the overall data. The data were organised into a hierarchical structure according to the prevalence of each theme and the number of participants supporting them.

Ethical considerations

Ethical approval was granted by the University of Leicester's Ethical Committee in accordance with their Research Ethics Code of Practice. Consent was gained both from directors of the counselling organisations approached to recruit participants and research participants, with full transparency of the purpose of the research. Participants were assured confidentiality and anonymity in the research report. The sensitive nature of the research required all participants to be receiving clinical supervision as a means of accessing ongoing support should any issues arise. Participants were also made aware of their right to withdraw without reason at any point prior to reporting; however, none did.

Results

Completed thematic analysis yielded themes and subthemes that were organised into four domains. Domains and main themes are outlined in Table 1.

Table 1: Ordered domains and main themes.

Domain (4)	Theme (12)
1. Impact from within	Threatens Strengthens
2. Impact from outside	Taboo Outside real world needs Codependency Triangular relationship
3. Impact on therapist	Denigration Inadequacy Taken for granted Role confusion
4. Legacy	Personal growth Gaining therapeutic courage

Domain 1: impact from within

Experiences most commonly referenced were those describing an impact within the therapeutic relationship, and encompassed themes linked by an interrelational process occurring when considering the fee. The two main themes in this domain captured an interesting dichotomy that featured in ten participants' responses: the belief that money has the potential to both threaten and strengthen the therapeutic relationship, introducing a degree of trepidation.

Theme 1a: threatens

All participants described a harmful impact the fee imposed upon the therapeutic process. A sense of risk was reported to permeate practice, threatening to rupture the relationship or jeopardise the survival of the work if money was overtly brought into the therapeutic space. Participant 7 described her ambivalence in speaking about money and the risk it posed to herself and the work:

I wasn't very good at pushing it and when I did try to push it, it was um threatening to me and possibly to the relationship (P7, female)

Furthermore, seven participants described it as a topic considered 'out of bounds' to the therapist, or one that encroached upon material that was 'off limits', with some participants left managing powerful dissonance when silencing it in the room. Participant 3 described her experience of a relationship rupture:

She sort of put up a defensive barrier saying that I had humiliated her by talking about money...it was not for me to challenge (P3, female)

Participant 6 perceived a culture of avoidance amongst volunteer counsellors that she readily

colluded with to appease the interrelational threat that she experienced the fee to pose:

I can almost play dumb to it, yer know, I don't know what's going on...um if it becomes an issue well it's not mine, it's almost like the client knows not to bring it up with me because I'm not dealing with that (P6, female)

Theme 1b: strengthens

Ten participants described the fee also having a strengthening impact on the relationship. However, this was typically only acknowledged in hindsight. Participant 3 shared her experience of inviting a dialogue about the fee within the therapeutic space:

I did bring it into the session and it did ultimately prove to be quite a pivotal moment in our relationship actually, it was difficult but it really cemented our relationship (P3, female)

Three key areas were reported: in facilitating a moment of therapist–client connection (illustrated above), providing a vital boundary that frames the professionalism of the work and in contributing a common language that made it possible to speak to a deeper emotional exchange. Participant 5 referenced this metaphorical usefulness:

It's a way of talking in concrete terms about something completely intangible and emotional [...] so it provides a really useful metaphor [...] It could be a really useful way of talking about something much deeper for him in a language that he was fluent in (P5, female)

Domain 2: impact from outside

Participants' interrelational experiences were also impacted by factors outside of the therapeutic relationship, including the voluntary organisation, therapeutic profession and wider societal culture.

Theme 2a: taboo

Ten participants referenced the unspeakable nature of money that exists as a taboo within the therapeutic profession, captured in participant 2's discomfort:

I just didn't want to do the maths. I'm a therapist and therapists don't think about money do they? (P2, female)

This was seen to be reinforced by the culture of the organisation, particularly when the concrete handling of the money happened outside the therapeutic space. For some this was favourable, enabling them to sidestep responsibility. However, reference was commonly made to it becoming the elephant in the room and ultimately having a more challenging impact on the work. Participant 3 shared her experience of feeling conflicted about where money belonged within the organisation, with her resulting passivity raising further tension caused by a heightened presence of 'the unspoken':

I can really see that it was in the room, but at the time it felt like it was out there. It's an out there thing that gets sorted out somewhere in reception. I wonder if I let it get brushed under the carpet... I felt like I kind of colluded with it, in not addressing it (P3, female)

Despite some participants finding they colluded with the organisation, participant 5 felt infantilised by her lack of authority over the process:

There's something sort of childlike about not having to do those bits, it's almost as though I'm not old enough or trusted enough... it's not quite the whole job, it's not quite adult, it's me not taking the responsibility I should take (P5, female)

Theme 2b: Outside real-world needs

The absence of a direct fee-for-service exchange was described by participant 3 as giving the therapy a 'mystical edge', being made available outside the conventions of the real world. When a deviant payment demanded the therapist's involvement, participant 5 reported having to draw upon skills from a completely different world that felt discordant in her therapeutic world:

Suddenly I was drawing on a professional part of me from previous jobs, which has been very separate from the counsellor me, but those two worlds were having to come together in absolute tension [...] they do not sit happily together (P5, female)

Theme 2c: codependency

For eight participants, a relationship of codependency was reported within the organisation with the therapist, client and organisation each striving to have their needs met by the exchange. Therapists noted a restrictive impact of simultaneously trying to meet the

needs of the client within the therapeutic relationship and the organisation within the wider service delivery relationship. This dynamic was reported to bind the exchange in tension, particularly when the needs of each party were inharmonious. Participant 4 describes her dilemma when faced with conflict between the organisation's financial need and her ethical commitment to nonmaleficence:

On the one hand, there's this charity and they rely on the donations of clients to continue. I think with this particular client I don't know, the feeling of I'm taking advantage of him still felt, it was overpowering, it was more powerful than its doing good for the charity (P4, female)

The therapist's need to gain clinical experience introduced a further dependency between the volunteer and organisation, which was accompanied by a debt of gratitude. Participant 2 described the dependency culture of the voluntary organisation, experiencing it to undermine the aim of her work to model an autonomous way of relating:

It was like having that elephant in the room and not feeling empowered enough to say something. Surely the aim must be for [the client] to feel empowered by autonomy and being able to pay their way if possible. (P2, female)

Theme 2d: triangular relationship

The third-party presence of the organisation within the therapeutic dyad was cemented by the monetary transaction happening outside the therapeutic space. Participant 2 shared her experience of feeling excluded from the relationship between the client and organisation:

Triangular relationships were kind of a theme; it had already been established with reception (P2, female)

This separate relationship facilitated splitting, enabling material to be kept outside the therapeutic space. Participant 11 experienced the triangular relationship as undermining, leaving him feeling ineffective in his attempt to contain the therapy:

It was almost as though there was a third party out there that was challenging my work to try and maintain the frame (P11, male)

Domain 3: impact on therapist

Despite not being in receipt of the money, participants still reported a personal impact of the monetary

exchange that entered the work. For participant 2 a minimal contribution resonated with feelings around personal worth and the worth assigned to her work:

I was thinking a pound, right; it really felt like is that what I'm worth? [...] It just seemed to belittle it. I think I particularly took it quite personally at that time. . . I think I felt quite wounded (P2, female)

Feelings of inadequacy were reinforced by the organisation when a small contribution was approved. The organisation's acceptance was seen to further undermine the professionalism of the volunteer and the quality of the service being provided. Participant 10 said:

In saying that it was ok to accept something as little as a pound reflected how they felt about their therapists. It was kind of like a slap in the face really (P10, male)

Domain 4: legacy

The experience of money management within the organisational setting had a lasting impact on all participants, involving a process of working through a period of adversity leading to more courageous practice and personal growth. Participants described a process of learning about their complex relationship with money and how the additional challenges brought about by the organisational setting demanded that they confront these to better understand the therapeutic process. Metaphorical reference to a fight or disturbance was common, as captured by participant 8:

I've been wrestling with this for some time [...] I think that once that's in place everything kind of becomes a bit clearer. I don't feel that confusion or that tug in different directions anymore (P8, female)

With clinical experience came a greater sense of entitlement to address issues surrounding money and benefit from its strengthening impact.

Experience has taught me that valuing myself as a counsellor is actually really important and that comes across to the client, it's part of what makes them feel safe and contained (P3, female).

Discussion

Findings suggest that the experience of working with the fee within a voluntary organisation setting rouses

a complex set of challenges for the therapist. Its impact was felt both within and from outside the therapeutic relationship to test the frame. While this is not a new or unexpected finding within existing research on charging therapists (Monger, 1998; Power & Pilgrim, 1990), it highlights that it is also experienced by volunteer therapists working without financial gain. This contradicts the common belief that remaining separate to the monetary exchange prevents it from entering the work (Mayer & Norton, 1981) or that it is the powerful position of the money-earning therapist that heightens its presence within the relationship (Taylor, 2002). Instead, the potency of the fee is experienced regardless of who benefits financially or where its concrete handling happens, with the important difference being the specific dynamic of the setting.

The powerful interrelational impact revealed a new and interesting dichotomy. Practitioners believed in the potential for the monetary exchange to both threaten and strengthen the therapeutic relationship. Participants' experiences were more prominently focussed on tension and risk, a finding consistent with the weight of existing research (e.g. Lasky, 1984; Power & Pilgrim, 1990). Fears that it would contaminate the work or introduce a damaging commercial aspect to an otherwise intimate connection resonate with the research of Mayer and Norton (1981) and Clary et al. (1998). The strengthening impact was reportedly reached only by surviving a period of discomfort, which first relied on the relationship demonstrating sufficient resilience to tolerate the threat and second to risk overtly bringing it into the work.

The process of working through the threat of a relationship rupture facilitated an experience in which the fee provided a useful therapeutic tool. Three key areas were noted: marking a moment of therapist–client connection, framing the relationship with a professional boundary and providing a common language to speak to a deeper emotional exchange. Recognising and engaging with the symbolic use of the fee marks a depth of understanding that volunteer therapists are rarely given credit for. Gully and Harris (1982) note a tendency for volunteer therapists to collude in an avoidance of the fee, yet there was notable impetus amongst participants to take responsibility for the exchange and understand what it contributes to the therapeutic process.

Gray (2002) argues that money inevitably enters the therapeutic space, imposing upon the client's omnipotence within a fantasised unconditional

relationship. Despite its concrete handling happening outside the therapy room, participants also noted that it always presented within the work in an unconscious or symbolic way. It was experienced to pervade the boundaries of the frame, attributed to a shared uncertainty over who held responsibility for it. Many felt that it presented as 'the elephant in the room' and that the challenge of speaking it was made more difficult by the organisation dictating that it remains separate. Contrary to Shipton and Spain's (1981) view that the unpaid volunteer has little incentive to work with the fee, this suggests the traditions of the voluntary organisation leave the therapist outside the exchange and unsupported when it inevitably presents within the work.

A complex tripartite relationship was experienced by all participants. This supports Copeland's (2005) interrelated working alliances that emerge from the introduction of a third party. Participants noted where reception staff took responsibility for the monetary transaction, a separate relationship was established and subsequently nurtured by the ongoing exchange. Taylor (2002) argued that this arrangement undermines the therapist's autonomous practice and introduces conflict in his or her attempt to contain the work. Monger (1998) suggested it denies the therapist the opportunity to work with valuable unconscious processes that get communicated outside the therapeutic space. Both resonate with a consensus amongst participants that the triangular relationship heightened the challenge of assuming responsibility for the fee, neither supporting them to contain it or prevent it from entering the work. Instead it was experienced to permeate the therapeutic frame, testing their attempt to provide a secure container for all aspects of the client's communication.

The third-party presence of the organisation revealed an important cluster of new findings that point to a fragile dynamic of codependence. This refers to the differing needs of the therapist, organisation and client, all seeking satisfaction from the exchange. For the therapist trying to manage the frame, it raised disabling conflict and periods of impasse, a finding also noted by Symons and Wheeler (2005). Where the organisation's income was dependent on the client's financial contribution, practitioners experienced underlying tension in attempting to work with its therapeutic significance as it presented within the work. Participants commonly reported feeling conflicted when holding in mind material communicated by nonpayment for example, alongside the organisation's need for a stable income.

The volunteer's commitment to the therapeutic relationship was additionally complicated by dependence on the organisation for the overall provision of the service. Participants reported feeling disempowered and unable to challenge the imposition of the organisation, which was further compounded by gratitude felt for the opportunity to practice. Experiences echoed the tendency noted by Shields (1996) for collusion between two parties against the third and marked a stark departure from Fairburn's (1952) model of 'mature dependence'. Instead, it points to the disempowering impact of working within a set of symbiotic relationships, which rest on a foundation of gratitude in the absence of a contractual fee-for-service arrangement.

This set of findings has significant implications for each dependent party. Where organisations took responsibility for handling the fee, practitioners reported feeling infantilised, an arrangement that perpetuates dependencies rather than nurtures independence, which Krueger (1986) supposed to be an attraction of the 'parent' organisation for the volunteer therapist. The precariousness of an income reliant on unpaid volunteers additionally challenges the organisation's autonomy and questions the position from which they might demand 'market level contributions' (Power & Pilgrim, 1990). The resulting acceptance of a minimal contribution reinforces the client's infantile dependencies by compounding their sense of indebtedness (Geistwhite, 2000). This dynamic of codependency has the potential to disable the exchange in a way that inhibits each party in their individual striving for maturity, fundamentally undermining the aims of the work it sets out to provide.

Reaching an impasse in the work and recognising the personal impact of money lead most participants to risk 'speaking the unspeakable'. Mobilising the work enabled the volunteer therapist to reconstruct the frame and contain the monetary exchange within the dyadic relationship, establishing a model consistent with Gray's (2002) optimum situation. Participants shared the importance of modelling autonomy with their client, which led them to value themselves as professionals. Reaching a point in which the fee could be worked with to add therapeutic benefit demonstrates an encouraging commitment to understanding personal associations with money and to take ownership of what this contributes to practice. Deciphering this, while working within the specific culture of a voluntary organisation, evidences positive movement towards more courageous fee practices.

Limitations

The small-scale nature of this study provides only tentative conclusions about the specific setting under investigation, making it impossible to generalise findings. Interviews were conducted with practitioners only, and therefore, the client's voice is not represented. Through practising reflexivity, attempts were made to account for the subjective nature of qualitative research. However, findings were inevitably influenced by the researcher's background. This may have led to researcher bias in the specific themes drawn out in the interview process.

Implications for practice and recommendations

Within the therapeutic relationship, the strengthening effect of overtly handling the fee was significantly overshadowed by its threat and thus could be considered easier left outside the therapy room where the setting permits. With the weight of existing research focussed on tension and challenge, it might itself dissuade a creative approach to working with the fee, strengthening the culture of avoidance that participants reported having to 'wrestle with' before being able to fully embrace its usefulness within their work.

Tension experienced in the organisational setting may further undermine the therapist's resilience to tolerate threat, particularly if they feel unsupported. Voluntary organisations have a responsibility to embrace rather than neutralise the therapist's role in money management, permitting them to negotiate contributions that reflect the value of the relationship and facilitating an ongoing dialogue within the therapy. Volunteer therapists are encouraged to contain the fee within the therapeutic dyad, ensuring aspects of the exchange do not seep into the wider organisation that allows opportunities for therapeutic movement to be missed. Therapists have a crucial responsibility to commit to exploring their personal relationship with money and to strengthen their awareness of unresolved tensions that may influence practice.

Conclusion

Money can be worked with creatively and therapeutically to facilitate movement within therapy. However, this is influenced not just by the complex relationships with money that the therapist and client bring to the work, but also the unique

culture of the setting in which practice takes place. The traditions of some voluntary organisations can reinforce the taboo that surrounds money for therapy by choosing to keep the fee exchange outside the work and thus neutralise the therapist's role. Regardless, money still enters the therapeutic space in some form and the resulting triangular relationship contributes greater challenge for the therapist attempting to construct a secure frame in which to work with it. The need to modify the dyadic relationship to accommodate a tripartite dynamic can obstruct each party in their individual striving for maturity and thus undermine the aims of the work. Asserting authority to bring together the intimate and commercial aspects of the exchange offers mutual benefit, providing an essential currency with which to assign value to the work.

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Biography

Hannah Marie Cooper is a Psychodynamic Practitioner working in the voluntary and private sector. She is also the Project Manager of a voluntary counselling organisation based in West Norfolk. This article summarises the findings of research carried out as part of her MA at the University of Leicester.